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09/833530

**Application or Docket Number** 

PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000												
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER TH				
TOTAL CLAIMS			14		-			RATE	FEE	1 :1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		I	BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			14 minus 20=		. 6		I	X\$ 9=	**: . *	OR	X\$18=.	
INDEPENDENT CLAIMS			6 minus 3 =		. 3		ł	X40=		OR	X80=	240
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT				ŀ	+135=	. ,	OR	+270=	070
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	956	
CLAIMS AS AMENDED - PART II								:		10.1	OTHER	
	, (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	SMALL	
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT	ť	HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.14	Minus	/ 4	<u>t                                    </u>	= ()		X\$ 9=		OR	X\$18=	
AME	Independent	6	Minus	••• (	e	- 4		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
								TOTAL		1	, TOTAL ADDIT, FEE	
·		(Column 1)		(Colu	mn 2)	(Column 3)	A	LDDIT. FEE	: •		AUUII. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***	. C. A.D.	<u> </u>		X40=		OR	X80=	
	PINST PHESE	NTATION OF MI	JUIPLE DEF	ENUENI	CLAIM	نـــاــانــــ	֓֟֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֡֓֓֡֓֓֡֓	+135=		OR	+270=	
								TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1) CLAIMS		(Colur		(Column 3)	_ ا					
AMENDMENT C	, 	REMAINING AFTER AMENDMENT	:	NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	<i>p</i>	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	••		=	lΓ	X\$ 9=		OR	X\$18=	
	Independent		Minus	•••				X40=		OR	X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=	3	OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											TOTAL	
•••	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEEOR ADDIT. FEE											

FORM PTO-875 (Rev. 8/00)

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